

Education Background*

Highest Education Level
(please tick (✓))

: ☒ Doctorate (PhD) ☐ Master's Degree ☐ Bachelor's Degree
☐ Diploma ☐ Professional Certificate ☐ Others (Please specify):

Working Experience

: ☒ < 1 Year ☐ >1 Year (Please specify) : _____ Years

Company Information*

Company Address

: **LORONG 99**

City

: **BERLIN**

Postcode

: **11111** State/Country: **PUTRAJAYA**

Contact Person Name
i.e. Human Resources

: **CCK JOSEPH**

Telephone No

: + **123** - **0163122750**

Email Address

: **cckiat2002@gmail.com**

Examination Session Information*

Exam type (please tick (✓))

: ☒ First time ☐ 1st Re-take ☐ 2nd Re-take ☐ 3rd Re-take

Exam mode (please tick (✓))

: ☐ Online ☒ Paper-based

Examination Location/Center
(For paper-based exam only)

: **REICHSTAG**

Exam
Date

: **12** / **12** / **1222**
Day Month Year

Terms & conditions:

- * Compulsory to fill up the information.
- ** Exam link (online exam), result notification & e-certificate will be sent to the primary email address.
- Applicants will be notified of the exam result between three (3) to ten (10) working days from the examination date.
- E-Certificates will be sent to the successful applicant within a week from the date of the results notification.
- E-Certificates will only be issued after clearance of payment dues, if any.

Request for Exam Time Extension*

- Candidates will only be entitled to additional time if **both** boxes are ticked 'No' below.

Is English your primary/native
spoken language?

: ☒ Yes ☐ No If 'No' state your first language : _____

Is English your primary written
language?

: ☒ Yes ☐ No If 'No' state your primary written language : _____

Request for Special Assistance (valid for paper-based exam only)

Note:

- Applicant with special needs or physical disabilities may request for special assistance, within reason, in advance.
- Special assistance requested will be subject to our approval and verification, and subject to constraints that may be within or outside our ability to address. Special assistance that could violate the integrity of the examination will not be entertained.
- Request must be made at least three (3) days in advance from date of exam. We reserve the right to decline last minute requests.

Type of special
needs/physical disability

: _____

Assistance required
(please describe)

: _____

Publishing of successful candidate's name in MSTB portal *(Please tick where appropriate)*

☒

I agree to my name being published in MSTB portal once I have passed the exam.

☐

I do not agree to my name being published in MSTB portal once I have passed the exam

General Terms of Application and Code of Conduct

By signing and submitting my application for certification, I consent to the general terms of application & Code of Conduct below:

With my application I have reviewed and understood the certification and examination information posted at MSTB's website of <http://www.qportal.com.my>. I have fully reviewed the information on the certification process, the requested qualifications and the general terms of the certification. I agree that I am able to abide to the certification process as stated and that I will notify MSTB on any arising change of circumstances that will affect my ability to do so, to enable timely remedial arrangements prior to the exam.

On request I shall provide further information to prove my qualification to sit the requested exam.

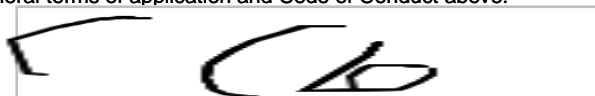
Code of Conduct: I agree that if and when awarded the requested certification, I shall:

- a) comply with the relevant provisions and requirements of the ISTQB certification, as publicly stated on the MSTB website and as notified to me from time to time;
- b) make claims regarding the ISTQB certification only with respect to the scope for which certification has been granted, as publicly stated on MSTB website and as notified to me from time to time;
- c) not use the certification in such a manner as to bring the MSTB and/or ISTQB into disrepute, and that I shall not make any statement regarding the certification which the MSTB and/or may consider misleading or unauthorized,
- d) discontinue the use of all claims to certification that contains any reference MSTB and/or ISTQB or certification upon suspension or withdrawal of certification, and to return any certificates issued by the board, and
- e) not use the certificate in a misleading manner and shall adhere to the conditions for use of the certification mark and/or logos,
- f) On request I shall provide further information to prove my qualification to sit the requested;
- g) Adhere to the ISTQB Code of Ethics as publicly stated on the ISTQB website and as notified to me from time to time.

I hereby acknowledge that I understand and shall comply with the general terms of application and Code of Conduct above.

CHIN CHUN KIAT

Name of Applicant



Signature